

Purchasing Authorization and Reimbursement Request

BUDGET: Budget Approval: (Signed by PI or Administrator)						
If more than one budget is charged, list all budgets and percentages:			Budget	Percentage	Budget	Percentage
Name:	Email: Phone:					
UW Employee OUW Student ONon-UW Claimant Vendor:						
ITEMS PURCHASED (Original receipts or itemized receipts for foods required)						
Item Description:				\$		
Item Description:				\$		
Item Description:				\$		
			Total	\$		

For questions regarding reimbursement polices and regulations, contact Matt Anderson at 616-1767, matta@uw.edu or Cheryl Kalent at 543-7405, epipays@uw.edu